



Tot Spot Preschool

Pre-Registration Form

I would like to reserve a spot for my child at TotSpot Preschool for the 2024-25 school year. I am returning this form with a nonrefundable \$75 registration fee to hold my child's place.

Name of Child: _____

Age of Child as of August 1, 2024: _____

Child's Birthdate: _____

Indicate which option is best for your family:

For 4 - 5 year old preschool, (Kindergarten readiness) I am interested in:

- a. 3 days a week, full days, Monday, Wednesday and Friday
- b. 5 days a week, half days:
 1. Half day AM (8:20 -10:50)
 2. Half Day PM (11:50-2:20)

For 3-4 year old preschoolers we offer Tuesday/Thursday Half Day classes.

Do you prefer:

- a. AM (8:20 -10:50)
- b. PM (11:50-2:20)

Please provide the information for the best person to contact regarding registration.

Name of parent(s): _____

Cell Number: _____

Email Address: _____

Registration Payment Options: (check one)

____ Cash

____ Check # _____

____ Online Payment - journeychurchlowell.com/tot-spot-preschool